PTO/SB/06 (08-00)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number, Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE \$740.0 OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = OR (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 140.00 * If the difference in column 1 is less then zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR (Column 1) (Column 2) (Column 3) SMALL ENTITY **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL RATE TIONAL **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total Minus (37 CFR 1.16(c)) OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTAL OR ADDIT, FEE (Column 1) (Column 2) (Column 3) ADDIT, FEE CLAIMS HIGHEST ADDI-ADDI-AMENDMENT REMAINING NUMBER PRESENT (RATE TIONAL **RATE** TIONAL AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(c)) Minus OR Independent Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING PRESENT NUMBER RATE TIONAL RATE TIONAL **AMENDMENT** AFTER **PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total (37 CFR 1.16(e)) Minus = \$ OR Independent *** Minus (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

:04192 0094 DVUS

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS							0	RATE	FEE	£ 3.4	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0"						olumn 2		TOTAL			TOTAL	1//
	CLAIMS AS AMENDED - PART II									Un	OTHER	THAN
(Column 1) (Column 2) (Column								SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	-20)	=		X\$ 9=		OR	X\$18=	
	Independent	* /	Minus	***	3	= _	П	X40=	1	OR	X80≥,	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135=		OR	+270=	
TOTAL												
		(Column 1)		(Colum	nn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 4	Minus	20	D	=		X\$ 9=		OR	X\$18=	1
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	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		1	+135=		9	+270=	
		· · · · · · · · · · · · · · · · · · ·	1 1				L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	O	(Column 2)		ODIT. FEE		OR	ADDIT. FEE	
AMENDMENT		(Column 1) CLAIMS		HIGH	EST	(Column 3)	1 г		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	. /	Minus	20	0	=	11	X\$9=	ere being	OR	X\$18=	
	Independent	. /	Minus	*** (3	= -	1	X40=			X80=	
_	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM]			OR	1	
* If the entry in column 1 is less than the entry in column 2, writ "0" in column 3.											+270=	-)
**	if the "Highest Nu If the "High st Nu	mber Previously Pa mber Previously Pa nber Previously Pai	aid For" IN THI aid For" IN THI	S SPACE IS	s less tha s less tha	in 20, enter "20 an 3, enter "3."		TOTAL LODIT. FEE	ropriate box		TOTAL ADDIT. FEE lumn 1.	